

REPORT NO. 1 Form 571A (REV. 2/97)

CONTROLLER'S USE ONLY															
Document No.		C	C	Y	Y	M	M	D	D	Fund				Agy	

REPORT OF ACCRUALS TO CONTROLLER'S ACCOUNTS

June 30, 20__

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Agency (name and number)		Fund (name and number)	
Agency (5555)		GENERAL FUND - 0001	
Name of Contact Person (Please Type or Print)	Title	Telephone Number	
Jane Smith	Accounting Administrator	(916) 444-5555	

I certify (or declare) under penalty of perjury that the data on the attached statements is true and correct; and that I have not violated any of the provisions of Article 4, Chapter 1, Division 4, Title 1, Government Code (commencing with Section 1090).

Subscribed and executed this 20th day of July 20__, at Sacramento, California.

AUTHORIZED SIGNATURE _____

ACCOUNT TITLE	ENCUMBRANCES	D C	ACCOUNT	AMOUNT	D C
GENERAL CASH			1 1 1 0	215,599.78	D
REVOLVING FUND CASH			1 1 3 0	79,799.46	D
CASH ON HAND			1 1 9 0	2,850.00	D
ACCOUNTS RECEIVABLE - ABATEMENTS			1 3 1 1	10,311.29	D
ACCOUNTS RECEIVABLE - REIMBURSEMENTS	Total encumbrances that will be funded by reimbursements	1/ 81,785.40 D	1 3 1 2	105,666.78	D
ACCOUNTS RECEIVABLE - DISHONORED CHECKS			1 3 1 5	2,364.00	D
ACCOUNTS RECEIVABLE - OTHER			1 3 1 9	94,500.52	D
CONTINGENT RECEIVABLES			1 3 8 0	383,091.67	D
DUE FROM OTHER FUNDS		2/ 1 4 1 0	0 0 1 4	1,843,538.16	D
DUE FROM OTHER GOVERNMENTAL ENTITIES			1 5 9 0	216,978.22	D
DUE FROM OTHER APPROPRIATIONS			1 4 2 0	11,278,371.13	D
Net Debits / Credits		81,785.40 D	Net Debits / Credits		14,233,071.01 D

1/ Must be equal to all of the encumbrance credits shown for reimbursements on Form 571-C

2/ Specify the fund to which this pertains.

ORIGINAL AND ONE COPY -- Controller, Division of Accounting and Reporting